

AUTO CR - LOG SUMMARY #1057134

TYPE: INFO

Incident Finding / Overall Case Finding

Description of Incident

It is reported that the involved member responded to a call of a vicious animal. Upon arriving to the scene the dog charged at the involved member and in fear for his life fired one round but missed. The dog ran into a backyard and Animal Control was called. RD [REDACTED]

Finding

Entered By

Entered Date

(None Entered)

Reporting Party Information

| Role | Name | Star No. | Emp No. | UOA / UOD | Position | Sex | Race | Address | Phone |
|--------------|-----------------------------|------------------|---------|------------|----------|--------------------|------|---------|-------|
| CPD Employee | Reporting Party Third Party | CASCONE, JAMES D | 560 | [REDACTED] | 007 / | SERGEANT OF POLICE | M | WHL | |

Incident Information

| Incident From Date/Time | Address of Incident | Beat | Dist. Of Occurrence | Location Code | Location Description |
|---------------------------------------|---------------------|------|---------------------|-----------------------|----------------------|
| 17-SEP-2012 06 50 - 17-SEP-2012 06 50 | [REDACTED] | 0711 | 007 | 200 - VACANT LOT/LAND | |

Accused Members

| Role | Name | Star No. | Emp No. | UOA / UOD | Position | Status | Initial / Intake Allegation |
|------|------|----------|---------|-----------|----------|--------|-----------------------------|
| | | | | | | | |

Other Involved Parties

| Role | Name | Star No. | Emp No. | UOA / UOD | Position | Sex | Race | Address | Phone |
|--------------|-----------------|----------------------|---------|------------|----------|----------------|------|---------|-------|
| CPD Employee | Involved Member | HENEGHAN JR, JAMES E | 5703 | [REDACTED] | 007 / | POLICE OFFICER | M | WHL | |

Involved Party Associations

| Role | Rep. Party Name | Related Person | Relationship |
|------|-----------------|----------------|--------------|
| | | | |

Incident Details

| | | | |
|--------------------------------|------|------------------------------|-----|
| CR Required? | | Manner Incident Received? | PAX |
| Confidential? | | Biased Language? | N |
| Extraordinary Occurrence? | N | Bias Based Profiling? | N |
| Police Shooting (U)? | N | Alcohol Related? | N |
| Non Disciplinary Intervention: | N | Pursuit Related? | N |
| Initial Assignment: | IPRA | Violence in Workplace? | N |
| Notify IAD Immediately? | N | Domestic Violence? | N |
| EEO Complaint No.: | | Civil Suit Settled Date: | |
| Civil Suit No.: | | Notify Chief? | |
| Notify Chief Administator? | N | Notification Does Not Apply? | Y |
| Notify Coordinator? | | | |
| Notification Other? | N | | |
| Notification Comments: | | | |

Incident Category List

| Incident Category | Primary? | Initial? |
|--|----------|----------|
| 20B - GROUP 20 - NOTIFICATIONS SHOTS FIRED - DESTRUCTION OF ANIMAL | Y | Y |

Investigator History

| Investigator | Type | Assigned Team | Assigned Date | Scheduled End Date | Investigation End Date | No. of Days |
|--------------|------|---------------|---------------|--------------------|------------------------|-------------|
| | | | | | | |

Investigator History

Extension History

| Name | Previous Scheduled End Date | Extended Scheduled End Date | Date Certified Letter Sent | Reason Selected | Explanation | Extension Report Date | Approved By | Approved Date | Approval Comments |
|------|-----------------------------|-----------------------------|----------------------------|-----------------|-------------|-----------------------|-------------|---------------|-------------------|
|------|-----------------------------|-----------------------------|----------------------------|-----------------|-------------|-----------------------|-------------|---------------|-------------------|

Current Allegations

| Accused Name | Seq. No. | Allegation | Category | Subcategory | Finding |
|--------------|----------|------------|----------|-------------|---------|
|--------------|----------|------------|----------|-------------|---------|

Situations (Allegation Details)

| Accused Name | Alleg. No. | Situation | Victim/Offender Armed? | Weapon Types | Weapon Other | Weapon Recovered? | Deceased? |
|--------------|------------|-----------|------------------------|--------------|--------------|-------------------|-----------|
|--------------|------------|-----------|------------------------|--------------|--------------|-------------------|-----------|

Status History

| Resulting Status | Status Date/Time | Created By | Position | UOA / UOD | Comments |
|---------------------------|-------------------|-----------------|----------------------------|-----------|---|
| ADMINISTRATIVELY CLOSED | 28-SEP-2012 03:19 | WEEDEN, WILLIAM | DEPUTY CHIEF ADMINISTRATOR | 113 / | |
| CLOSED AT C.O.P.A. | 28-SEP-2012 03:19 | WEEDEN, WILLIAM | DEPUTY CHIEF ADMINISTRATOR | 113 / | |
| PENDING ASSIGN TEAM | 19-SEP-2012 05:04 | ROBERTS, GEORGE | SUPERVISING INVESTIGATOR | 113 / | |
| PENDING SUPERVISOR REVIEW | 19-SEP-2012 01:36 | TOUSANT, LISA | INTAKE AIDE | 113 / | |
| PRELIMINARY | 17-SEP-2012 09:52 | HAYES, SHANNON | INVESTIGATOR 2 COPA | 113 / | |
| PRELIMINARY | 17-SEP-2012 09:44 | HAYES, SHANNON | INVESTIGATOR 2 COPA | 113 / | |
| PRELIMINARY | 17-SEP-2012 08:41 | NUFIO, OSCAR | INVESTIGATOR I COPA | 113 / | Please note that the reporting Sgt is to fax the case report to IPRA on today's date. |

Attachments

| No. | Type | Related Person | No. of Pages | Narrative | Original in File | Entered By | Entered Date/Time | Status | Approve Content | Approve Inclusion |
|-----|-----------------------------|----------------|--------------|--|------------------|----------------|-------------------|----------|-----------------|-------------------|
| 1 | FACE SHEET | | | | NUFIO, OSCAR | | 17-SEP-2012 08:41 | | | |
| | DOCUMENTS - INTAKE INCIDENT | | 3 | [REDACTED] | N | HAYES, SHANNON | 17-SEP-2012 09:45 | APPROVED | | |
| | DOCUMENTS - INTAKE INCIDENT | | 1 | Drug Test Speciman Affidavit | N | HAYES, SHANNON | 17-SEP-2012 09:47 | APPROVED | | |
| | DOCUMENTS - INTAKE INCIDENT | | 1 | | N | HAYES, SHANNON | 17-SEP-2012 09:47 | APPROVED | | |
| | DOCUMENTS - INTAKE INCIDENT | | 1 | Notice of Alcohol and Drug Testing Following a Firearms Discharge Incident | N | HAYES, SHANNON | 17-SEP-2012 09:48 | APPROVED | | |
| | DOCUMENTS - INTAKE INCIDENT | | 1 | Forensic Drug Testing Custody and Control Form | N | HAYES, SHANNON | 17-SEP-2012 09:46 | APPROVED | | |
| | DOCUMENTS - INTAKE INCIDENT | | 1 | | N | HAYES, SHANNON | 17-SEP-2012 09:44 | APPROVED | | |
| | DOCUMENTS - INTAKE INCIDENT | | 3 | PO Heneghan | N | HAYES, SHANNON | 17-SEP-2012 09:51 | APPROVED | | |

Review Incident

| Review Type | Accused/Involved Member Name | Result Type | Reviewed By | Position | Unit | Review Date | Remarks |
|-------------|------------------------------|-------------|-------------|----------|------|-------------|---------|
|-------------|------------------------------|-------------|-------------|----------|------|-------------|---------|

Review Accused

| Review Type | Accused/Involved Member Name | Result Type | Reviewed By | Position | Unit | Review Date | Remarks |
|-------------|------------------------------|-------------|-------------|----------|------|-------------|---------|
|-------------|------------------------------|-------------|-------------|----------|------|-------------|---------|

Accused Finding History

| Accused | Allegation | Reviewed By | Reviewed Date/Time | CCR? | Concur? | Finding | Finding Comments |
|---------|------------|-------------|--------------------|------|---------|---------|------------------|
|---------|------------|-------------|--------------------|------|---------|---------|------------------|

Accused Penalty History

| Accused | Reviewed By | Reviewed Date/Time | CCR? | Concur? | Penalty | Penalty Comments |
|---------|-------------|--------------------|------|---------|---------|------------------|
|---------|-------------|--------------------|------|---------|---------|------------------|

Findings

| Accused Name | Allegations | Category | Concur? | Findings | Comments |
|--------------|-------------|----------|---------|----------|----------|
|--------------|-------------|----------|---------|----------|----------|

FACE SHEET (Notification Date: 17-SEP-2012) - LOG #1057134

TYPE: INFO

Reporting Party Information

| Role | Name | Star No. | Emp No. | UOA / UOD | Position | Sex | Race | Address | Phone |
|--------------|-----------------------------|------------------|---------|------------|----------|--------------------|------|---------|-------|
| CPD Employee | Reporting Party Third Party | CASCONE, JAMES D | 560 | [REDACTED] | 007 / | SERGEANT OF POLICE | M | WHL | |

Incident Information

| Incident From Date/Time | Address of Incident | Beat | Dist. Of Occurrence | Location Code | Location Description |
|---------------------------------------|---------------------|------|---------------------|-----------------------|----------------------|
| 17-SEP-2012 06:50 - 17-SEP-2012 06:50 | [REDACTED] | 0711 | 007 | 200 - VACANT LOT/LAND | |

Accused Members

| Role | Name | Star No. | Emp No. | UOA / UOD | Position | Status | Initial / Intake Allegation |
|------|------|----------|---------|-----------|----------|--------|-----------------------------|
| | | | | | | | |

Incident Details

| | | | |
|--------------------------------|------|------------------------------|-----|
| CR Required? | | Manner Incident Received? | PAX |
| Confidential? | | Biased Language? | N |
| Extraordinary Occurrence? | N | Bias Based Profiling? | N |
| Police Shooting (U)? | N | | |
| Motor Vehicle (V)? | | Alcohol Related? | N |
| Non Disciplinary Intervention: | N | Pursuit Related? | N |
| Initial Assignment: | IPRA | Violence in Workplace? | N |
| Notify IAD Immediately? | N | Domestic Violence? | N |
| EEO Complaint No.: | | | |
| Civil Suit No.: | | Notify Chief? | |
| Notify Chief Administator? | N | Notification Does Not Apply? | Y |
| Notify Coordinator? | | | |
| Notification Other? | N | | |

Initial Incident Category List

| Initial Incident Category | Primary? |
|--|----------|
| 20B - GROUP 20 - NOTIFICATIONS SHOTS FIRED - DESTRUCTION OF ANIMAL | Y |

Assignment History

| Assigned To | Assigned Team | Investigator | Assignment Date/Time | Assigned By | Reason |
|-------------|--|--------------|----------------------|--------------|--------|
| IPRA | CIVILIAN OFFICE OF POLICE ACCOUNTABILITY | - | 17-SEP-2012 20:41 | NUFIO, OSCAR | |

Status History

| Resulting Status | Status Date/Time | Created By | Position | UOA / UOD | Comments |
|---------------------------|-------------------|-----------------|----------------------------|-----------|---|
| ADMINISTRATIVELY CLOSED | 28-SEP-2012 03:19 | WEEDEN, WILLIAM | DEPUTY CHIEF ADMINISTRATOR | 113 / | |
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| PRELIMINARY | 17-SEP-2012 08:41 | NUFIO, OSCAR | INVESTIGATOR I COPA | 113 / | Please note that the reporting Sgt is to fax the case report to IPRA on today's date. |



OPERATOR
MARAFFI RD
WITNESS
DNA
TEST LOCATION
1057134

CHICAGO POLICE DEPARTMENT
ORIGINAL CASE INCIDENT REPORT

3510 S. Michigan Avenue, Chicago, Illinois 60653
(For use by Chicago Police Department Personnel Only)
CPD-11.388(6/03)-C

RD #: [REDACTED]
Case ID: [REDACTED]
EVENT #: [REDACTED]

INCIDENT

APPROVAL COMPLETE

IUCR: 5080 - Non-Criminal - Other Non-Criminal Persons

Occurrence [REDACTED] Beat: 0711 Unit Assigned: 0744
Location: [REDACTED] RO Arrival Date: 17 September 2012 18:50
330 - Other
Occurrence Date: 17 September 2012 18:50

NON-OFFENDER(S)

VICTIM - Individual

| | | | |
|--|----------------|--|---|
| Name: HENEGHAN, James E | Police Officer | | |
| Res: 1438 W 63rd St Chicago IL 312 - 747 - 8220 | Beat: 0713 | Demographics | |
| Empl: CHICAGO POLICE DEPARTMENT 1438 W 63rd St Chicago, Illinois Police Officer - Chicago | Beat: 0713 | Male White 5'05, 150 lbs Blue Eyes Brown Hair Short Hair Style Light Complexion | DOB: [REDACTED] Age: 44 Years Birth Place: Illinois |
| Sobriety: Sober | | | |
| CPD Officer: Yes | | | |

WITNESS - Individual

| | | | |
|------------------|------------------|--|---|
| Name: [REDACTED] | Demographics | | |
| Res: [REDACTED] | Beat: 0711 | Female Black 5'03, 103 lbs Brown Eyes Black Hair Short Hair Style Medium Complexion | DOB: [REDACTED] Age: 31 Years Birth Place: Illinois |
| CPD Officer: No | | Identification: | |
| | Type State Id | State Illinois | Number [REDACTED] |

WITNESS - Individual

| | | | |
|------------------|--------------|---|--|
| Name: [REDACTED] | Demographics | | |
| Res: [REDACTED] | Beat: 0511 | Female Black 5'02, 155 lbs Brown Eyes Black Hair Medium Hair Style Medium Complexion | DOB: [REDACTED] Age: 30 Years Birth Place: Illinois DLN: [REDACTED] |
| CPD Officer: No | | | |

RD # [REDACTED]

Chicago Police Department - Incident Report

RD #:

| | | | |
|--|--------------------------|-----------------------------------|----------------|
| Firearm #1 | | Possessor/User: Heneghan, James E | |
| Type: Semi-Automatic Pistol | | Serial # | |
| Make: Smith & Wesson -Us- (Bodyguard,Chief Special) | Model: 3953 | Serial # | |
| Feature: Stainless | Caliber/Gauge: 9 caliber | Barrel Length: 3.5 | |
| Displayed? No | Used? Yes | Registered? Yes | Recovered? Yes |
| Taken/Stolen? No | Duty Related? No | | Evidence? |
| Owner Known? Yes | Owner: [REDACTED] | Phone: 312 - 747 - 8220 | |
| Magazine Capacity: 8 | | | |
| Registered Status: Clear | | | |
| # Live Rounds: 8 | | # Spent Cartridges: 1 | |

FIREARMS

Request Type

Agency Name

Date

Request Animal Control 17 September
Center 18:04

Other Notifications May Be In Narrative.

NOTIFICATIONS

| | | | | |
|--------------|------------------------|--------------|-------|-----------|
| On Scene | Animal Control | 17 September | 301 | ALLISON,J |
| | Center | 18:55 | | |
| Notification | O.E.M.C. | 17 September | | |
| | | 18:56 | | |
| Notification | 116 Deployment | 17 September | | |
| | Operations Center | 19:05 | | |
| Notification | 620 Detective Area - | 17 September | 2118 | BECK, |
| | South | 20:14 | | |
| Notification | Office Of News | 17 September | 12481 | BAETY, |
| | Affairs | 20:15 | | |
| On Scene | 121 Bureau Of Internal | 17 September | 2563 | MARAFINO, |
| | Affairs | 20:35 | | |
| Notification | I.P.R.A. | 17 September | 142 | NUFIO, |
| | | 20:40 | | |

NARRATIVES

EVENT# [REDACTED] IN SUMMARY, R/O'S RESPONDED TO A CALL OF A VIOUS ANIMAL DISPATCHED BY OEMC. THIS WAS THE SECOND TIME R/O'S RESPONDED TO THIS ADDRESS. [REDACTED] (WITNESS) RELATED TO R/O'S THAT SHE WAS DROPPING HER KIDS OFF TO [REDACTED] (WITNESS) WHEN THEY OBSERVED THE NEIGHBORS THREE PIT BULLS RUNNING TOWARD THEM TO ATTACK FROM THE VACANT LOT NEXT DOOR. SHE RELATED THAT SHE RAN BACK TO HER VEHICLE AND BEGAN BEEPING THE HORN TO DISTRACT THE DOGS SO THE KIDS COULD GET IN THE HOUSE AT WHICH TIME THE DOGS JUMPED THE FENCE BACK INTO THEIR OWN YARD AT [REDACTED] R/O'S OBSERVED ONE GREY/WHITE PIT BULL STILL LOOSE IN THE VACANT LOT. ANIMAL CONTROL NOTIFIED, BUT NO ETA WAS GIVEN. THE PIT BULL TRIED TO ATTACK [REDACTED] VICTIM), WHO THEN DISCHARGED ONE ROUND FROM HIS FIREARM, MISSING SAID PIT BULL. NO INJURIES OR PROPERTY DAMAGE WAS REPORTED. R/O'S LOOKED FOR SPENT SHELL CASING FOR A PERIOD WITH NEG RESULTS. SEARCH SUSPENDED DUE TO DARKNESS. ANIMAL CONTROL ARRIVED ON SCENE AND REMOVED ONE PITBULL FROM THE PROPERTY, ANIMAL INVENTORY # [REDACTED]. THREE OTHER PIT BULLS SECURED ON SCENE. ANIMAL CONTROL LEFT NOTICE FOR PROPERTY OWNER. IPRA NOTIFIED AND LOG# 1057134 GENERATED.

NOTIFICATION: SERGEANT CASCONE Beat#: Star#: 1488 Emp#: Date: 17-SEP-2012 Time: 1858 NOT
 NOTIFICATION: WATCH COMMANDER FIDDLER Beat#: Star#: Emp#: Date: 17-SEP-2012 Time: 1900 NOT
 - STAR#: 13468 NAME: BEAT: 0744
 - STAR#: 1488 NAME: JAMES CASCONE BEAT: 0740

| | Star No | Emp No | Name | User | Date | Unit | Beat |
|-------------------|---------|------------|------------------|------------|-------------------|------|------|
| Reporting Officer | 13468 | [REDACTED] | KAELIN, Kelli, F | [REDACTED] | 17 Sep 2012 21:01 | 007 | 0744 |



FORENSIC DRUG TESTING CUSTODY AND CONTROL FORM

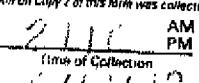
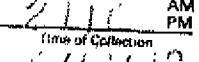
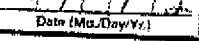
STEP 1: COLLECTOR OR EMPLOYER REPRESENTATIVE

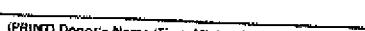
| | |
|--|------------------------------|
| A. Employer Name, Address, ID No. [REDACTED] | LAB ACCESSION NO. [REDACTED] |
| B. MRO Name, Address, Phone and Fax No. [REDACTED] | |
| C. Donor SSN or Employee I.D. No. [REDACTED] | |
| D. Donor Name: Last: [REDACTED] First: [REDACTED] | |
| E. Donor ID Verified: <input checked="" type="checkbox"/> Photo ID <input type="checkbox"/> Emp. Rep. _____ | |
| F. Reason for Test: <input type="checkbox"/> Pre-employment (1) <input type="checkbox"/> Random (3) <input type="checkbox"/> Reasonable Suspicion/Cause (5) <input type="checkbox"/> Post-Accident (2) <input type="checkbox"/> Promotion (22) <input type="checkbox"/> Return to Duty (6) <input type="checkbox"/> Follow-up (23) <input checked="" type="checkbox"/> Other (specify) (99) _____ | |
| G. Drug Tests to be Performed: [REDACTED] | |
| H. Collection Site Name: _____ Address: _____ City, State and Zip: _____ | Collection Site Code: _____ |
| Collector Phone No.: _____ Collector Fax No.: _____ | |

STEP 2: COMPLETED BY COLLECTOR

| | |
|--|--|
| Read specimen temperature within 4 minutes. Is temperature between 90° and 100° F? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, Enter Remark _____ | Specimen Collection: <input type="checkbox"/> Split <input checked="" type="checkbox"/> Single <input type="checkbox"/> None Provided (Enter Remark) _____ <input type="checkbox"/> Observed (Enter Remark) _____ |
| REMARKS | |

STEP 3: Collector affixes bottle seal(s) to bottle(s). Collector dates seal(s). Donor initials seal(s). Donor completes STEP 5.

| | |
|---|------------------------------|
| I certify that the specimen(s) given to me by the donor listed on the collection sheet on Copy 2 of this form was collected, labeled, sealed, and retained in accordance with applicable requirements | |
|   | |
| Time of Collection:  | |
| Date (Mo./Day/Yr):  | |
| (Print) Collector's Name (First, MI, Last) _____ | |
| RECEIVED AT LAB:  | Signature of Collector _____ |
| (Print) Accessorizer's Name (First, MI, Last) _____ Date (Mo./Day/Yr) _____ | |
| SPECIMEN BOTTLE(S) RELEASED TO: <input type="checkbox"/> Quest Diagnostics Courier <input type="checkbox"/> FedEx <input type="checkbox"/> Other _____ | |
| Name of Delivery Service Transferring Specimen to Lab | |
| Primary Specimen Bottle Seal Intact <input type="checkbox"/> Yes <input type="checkbox"/> No, Enter Remark _____ | |
| SPECIMEN BOTTLE(S) RELEASED TO: | |

| | |
|---|--|
| I certify that I provided my specimen to the collector; that I have not adulterated it in any manner; each specimen bottle used was sealed with a tamper evident seal in my presence; and that the information and numbers provided on this form and on the label affixed to each specimen bottle is correct. | |
|     | |
| Daytime Phone No. () _____ | |
| Evening Phone No. () _____ | |
| Date of Birth  | |
| Mo. Day Yr. | |

| PROPERTY INVENTORY - CHICAGO POLICE DEPARTMENT CPD-34.523 (REV. 10/08) | | PKG NO. | UNIT | INVENTORY NO. | | | | | | |
|---|------------------|---|----------------------------|---------------|--|------------------|------------------|--|--|--|
| DATE RECOVERED 17-SEP-2012 | | RD | RE-INVENTORY OF [REDACTED] | | | | | | | |
| ITEM ID | QUANTITY | DESCRIPTION OF PROPERTY | | | | | | | | |
| 1 | 1 | OTHER ANIMAL CONTROL INVENTORY RECEIPT SAN: 393370 | | | | | | | | |
| <p>Y 1 N V T O R C P</p> <p>Comments: [REDACTED]</p> | | | | | | | | | | |
| <p>INVENTORY</p> <table border="1"> <thead> <tr> <th></th> <th>\$ DEPOSITED AMT</th> <th>\$ INVENTORY AMT</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p>DATE RECEIVED</p> | | | | | | \$ DEPOSITED AMT | \$ INVENTORY AMT | | | |
| | \$ DEPOSITED AMT | \$ INVENTORY AMT | | | | | | | | |
| | | | | | | | | | | |
| Court Date | | OFFICER'S SIGNATURE - STAR - UNIT | | | | | | | | |
| Court Branch | | WATCH COMDR'S APPROVAL SIGNATURE (EXEMPT RANK REQUIRED FOR FIREARMS) | | | | | | | | |
| CURRENCY | | COURT ORDER - DISPOSAL INSTRUCTIONS | | | | | | | | |
| <p>EVIDENCE & RECOVERED PROPERTY SECTION USE ONLY</p> <p>Y</p> <p>INVESTIGATING OFFICER - STAR NO. 13468 UNIT 007</p> <p>CHARGE TYPE: INCHARGE</p> <p>BEAT OF RECOVERY 711</p> <p>TELEPHONE NO.</p> <p>TELEPHONE NO.</p> <p>JUDGE</p> <p>CT. BR.</p> <p>OFFICER'S SIGNATURE - STAR UNIT</p> <p>E & R.P.S USE ONLY</p> <p>Y</p> <p>Y</p> | | | | | | | | | | |
| IUCR: 5080 NON-CRIMINAL OTHER NON-CRIMINAL PERSONS | | | | | | | | | | |
| STATE CHARGES: | | | | | | | | | | |
| RECOVERED/SEIZED FROM - NAME ANIMAL CONTROL, | | | | | | | | | | |
| <input type="checkbox"/> DECEASED <input type="checkbox"/> ARRESTED | | | | | | | | | | |
| OWNER'S NAME KAELEN, KELLI Star: 13468 | | | | | | | | | | |
| ADDRESS [REDACTED] | | | | | | | | | | |
| FOUND BY - NAME KAELEN, KELLI Star: 13468 | | | | | | | | | | |
| <input checked="" type="checkbox"/> CHECK IF C.P.D. | | | | | | | | | | |
| HOLD FOR INVESTIGATION AND/OR EVIDENCE (IF NOT NEEDED FOR INVESTIGATION/EVIDENCE, LEAVE BLANK) | | SEE COPY 4 FOR NOTICE TO OWNER | | | | | | | | |
| <input type="checkbox"/> PROPERTY AVAILABLE FOR RETURN TO OWNER | | 1st OFFICER'S NAME KAELEN, KELLI | | | | | | | | |
| <input type="checkbox"/> TO BE DISPOSED OF BY CUSTODIAN (NOT TO BE RETURNED) (THIS APPLIES IF PROPERTY IS NOT EVIDENCE, NOT RETURNABLE AND/OR OWNER IS UNKNOWN) | | STAR NO. 13468 | | | | | | | | |
| INITIAL DESTINATION OF PROPERTY: ERPS | | UNIT 007 | | | | | | | | |
| VIA <input checked="" type="checkbox"/> POLICE MAIL <input type="checkbox"/> RECOVERING UNIT PERSONNEL <input type="checkbox"/> E & RPS PICKUP <input type="checkbox"/> EVID. LAB TECHNICIAN | | 2nd OFFICER'S NAME HENEGHAN JR, JAMES | | | | | | | | |
| APPROVING DESK SERGEANT FIDLER, BRENT | | SIGNATURE Electronic Approval | | | | | | | | |
| | | STAR NO. 5703 | | | | | | | | |
| | | UNIT 007 | | | | | | | | |
| | | DATE 17-SEP-2012 TIME 21:16 | | | | | | | | |
| COPY 1 - KEEP WITH PROPERTY | | | | | | | | | | |



**NOTICE OF ALCOHOL AND DRUG TESTING FOLLOWING
A FIREARMS DISCHARGE INCIDENT**

CHICAGO POLICE DEPARTMENT

Any refusal to take an alcohol breath test and provide a urine specimen, Department Rules and will subject you to discipline up to and including separation. I acknowledge and understand.

I acknowledge and understand this notice of testing.

Print Member's Name

Print member's Name
JAMES E. HENEGHAN JR.

Involved Member's Signature

Date and Time

17 SEP 12 / 2043

| | | |
|------------------------------|---|----------------|
| Type of Test: Alcohol | Location: 007th Rlist | Date and Time: |
| Type of Test: Drug | Location: 007th Rlist | Date and Time: |

I have provided notice to the involved member and conduct a pre-test interview.

I have provided notice to the involved member and conducted the alcohol and drug testing as indicated. **B.I.A. Supervisor's Name** **8/15/1** **Date and Time:**

B.I.A. Supervisor's Name

J. MARAFFINE
CPD-44-252 (REV. 11/11)

B.I.A. Supervisor's Signature

Date and Time

DISTRIBUTION ORIGINAL - TO B.I.A. SUPERVISOR, COPY - TO INVOLVED MEMBER

TACTICAL RESPONSE REPORT/Chicago Police Department

| | | | | | | | | | | |
|---|--|---|---|--|--|---|---|---|---------------------|--|
| 1 DATE OF INCIDENT 17-SEP-2012 | | TIME 18:50:00 | 2 ADDRESS OF OCCURRENCE [REDACTED] | | | | 3 LOCATION CODE 200 | 4 BEAT/OCCUR 0711 | | |
| MEMBER INVOLVED <input checked="" type="checkbox"/> DNA SUBJECT INFORMATION | 5 POSITION 9161 | 6 LAST NAME HENEGHAN JR | 7 FIRST NAME JAMES E | 8 STAR NO 5703 | 9 SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F | 10 RACE CODE WHI | 11 AGE [REDACTED] | 12 HT 505 | 13 WT 155 | |
| | 14 DATE OF APPT 05-MAY-1997 | 15 EMPLOYEE NO [REDACTED] | 16 UNIT & BEAT OF ASSIGNMENT 007 0744 | 17 DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off | 18 MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No | 19 MEMBER IN UNIFORM? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No | | | | |
| | 20 LAST NAME [REDACTED] | | 21 FIRST NAME [REDACTED] | 22 M I [REDACTED] | 23 SEX <input type="checkbox"/> 01 M <input checked="" type="checkbox"/> 02 F | 24 RACE [REDACTED] | 25 D O B [REDACTED] | 26 HT [REDACTED] | 27 WT [REDACTED] | |
| | 28 ADDRESS [REDACTED] | | | 29 TELEPHONE NO [REDACTED] | 30 WAS SUBJECT ARMED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No | 31 SUBJECT INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No | 32 SUBJECT ALLEGED INJURY? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No | | | |
| | 33 WHERE WAS MEDICAL TREATMENT OBTAINED? [REDACTED] | | | 34 BY WHOM? [REDACTED] | 35 CONDITION <input type="checkbox"/> 03 Hospitalized <input checked="" type="checkbox"/> 04 Not Hospitalized | 36 CHARGES PLACED [REDACTED] | <input checked="" type="checkbox"/> DNA | 37 CB NO [REDACTED] | IR NO [REDACTED] | |
| | REASON FOR USE OF FORCE (Check all that apply) | 38 SUBJECT'S ACTIONS DID NOT FOLLOW VERBAL DIRECTION <input type="checkbox"/> STIFFENED (DEAD WEIGHT) <input type="checkbox"/> OTHER _____ | | 39 MEMBER'S RESPONSE MEMBER PRESENCE <input type="checkbox"/> VERBAL COMMANDS <input type="checkbox"/> ESCORT HOLDS <input type="checkbox"/> WRISTLOCK <input type="checkbox"/> ARMBAR <input type="checkbox"/> PRESSURE SENSITIVE AREAS <input type="checkbox"/> CONTROL INSTRUMENT <input type="checkbox"/> OC/CHEMICAL WEAPON W/AUTHORIZATION <input type="checkbox"/> OTHER _____ | | 40 ADDITIONAL INFORMATION OFFICER FIRED HIS SERVICE FIREARM, ONE TIME, AT AN ATTACKING PITBULL, MISSING THE DOG. NO INJURIES OR PROPERTY DAMAGE WERE REPORTED. ALL NOTIFICATIONS MADE. | | | | |
| | | 41 WEAPON TYPE <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN | | 42 INCIDENT OCCURRED <input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors | | 43 LIGHTING CONDITIONS <input checked="" type="checkbox"/> 01 Daylight <input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input type="checkbox"/> 05 Poor Artificial <input type="checkbox"/> 06 Good Artificial | 44 WEATHER CONDITIONS CLEAR | | | |
| | | 45 MAKE/MANUFACTURER SMITH & WESSON -US- (BODYGUARD, CHIEF SPECIAL) | | 46 MODEL 3953 | | 47 BARREL LENGTH 035 | 48 CALIBER/GAUGE 9 MM | | | |
| | | 49 TASER DART ID NO [REDACTED] | | 50 WEAPON SERIAL NO (Include Letters) [REDACTED] | | 51 CHICAGO GUN REG NO [REDACTED] | 52 IL FIREARM OWNER ID NO [REDACTED] | 53 HANDGUN CERTIFICATE NO [REDACTED] | | |
| | | 54 SPECIAL WEAPON CERTIFICATE NO DNA | | 55 PROPERTY INVENTORY NO DNA | | 56 TYPE OF AMMUNITION USED Department Issued | 57 NO OF WEAPONS DISCHARGED BY THIS MEMBER 1 | 58 TOTAL NO OF SHOTS MEMBER FIRED 1 | | |
| 59 WHO FIRED FIRST SHOT <input checked="" type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER | | 60 WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input checked="" type="checkbox"/> 02 NO | | 61 NO OF CARTHDRGES/SHOT SHELLS RELOADED 0 | 62 HOW WAS MEMBER'S HANDGUN WORN <input checked="" type="checkbox"/> 01 RT SIDE (WAIST) <input type="checkbox"/> 02 LT SIDE (WAIST) | 63 HOW WAS MEMBER'S HANDGUN DRAWN <input checked="" type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW | | | | |
| 64 SPECIFY METHOD/EQUIPMENT USED TO RELOAD DNA | | 65 DID MEMBER USE SIGHTS <input checked="" type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO | | | | | | | | |
| 66 DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC) DNA | | 67 DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 05 FT <input type="checkbox"/> 02 05 - 10 FT <input checked="" type="checkbox"/> 03 10 - 15 FT <input type="checkbox"/> 04 OVER 15 FT | | | | | | | | |
| 68 PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input checked="" type="checkbox"/> 04 UNKNOWN | | 69 POSITION OF MEMBER DISCHARGING WEAPON <input checked="" type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY) | | | | | | | | |
| CASE INFO | | 70 NOTIFICATIONS (OC OR TASER INCIDENT) <input type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT & W C /DIST OF OCCUR NOTIFICATIONS (FIREARM INCIDENT) <input checked="" type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT & W C /DIST OF OCCUR <input checked="" type="checkbox"/> OP COMMAND <input checked="" type="checkbox"/> DET DIV Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report | | | | | | | | |
| | 71 SIGNATURES 73 REPORTING MEMBER (Print Name) HENEGHAN JR, JAMES E 17-SEP-2012 20:16:09 | | | | | | | | | |
| 74 REVIEWING SUPERVISOR (Print Name) CASCOME, JAMES D STAR NO 1488 SIGNATURE | | | | | | | | | | |
| 75 DATE REVIEWED 17-SEP-2012 20:16:49 TIME | | | | | | | | | | |

| | | | | | | | |
|---|--|---|---|--|---------------------------------|---|---|
| 41 WEAPON TYPE <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN | <input checked="" type="checkbox"/> 04 SEMI-AUTO PISTOL <input type="checkbox"/> 05 CHEMICAL WEAPON <input type="checkbox"/> 06 TASER <input type="checkbox"/> 07 OTHER | 42 INCIDENT OCCURRED <input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors | 43 LIGHTING CONDITIONS <input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input type="checkbox"/> 05 Poor Artificial <input type="checkbox"/> 06 Good Artificial | 44 WEATHER CONDITIONS CLEAR | | | |
| | | 45 MAKE/MANUFACTURER SMITH & WESSON -US- (BODYGUARD, CHIEF SPECIAL) | 46 MODEL 3953 | 47 BARREL LENGTH 035 | 48 CALIBER/GAUGE 9 MM | | |
| 49 TASER DART ID NO | 50. WEAPON SERIAL No. (Include Letters) | 51 CHICAGO GUN REG NO | 52 IL FIREARM OWNER ID NO | 53 HANDGUN CERTIFICATE NO | | | |
| 54 SPECIAL WEAPON CERTIFICATE NO | 55 PROPERTY INVENTORY NO DNA | 56 TYPE OF AMMUNITION USED Department Issued | 57 NO OF WEAPONS DISCHARGED BY THIS MEMBER 1 | 58 TOTAL NO OF SHOTS MEMBER FIRED 1 | | | |
| 59 WHO FIRED FIRST SHOT <input checked="" type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER | 60 WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input checked="" type="checkbox"/> 02 NO | 61 NO OF CARTRIDGES/SHOT SHELLS RELOADED 0 | 62 HOW WAS MEMBER'S HANDGUN WORN <input type="checkbox"/> 01 RT SIDE (WAIST) <input checked="" type="checkbox"/> 02 LT SIDE (WAIST) | 63 HOW WAS MEMBER'S HANDGUN DRAWN <input type="checkbox"/> 03 OTHER (Specify) <input checked="" type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW | | 64 SPECIFY METHOD/EQUIPMENT USED TO RELOAD DNA | 65 DID MEMBER USE SIGHTS <input checked="" type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO |
| 66 DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC) DNA | | | 67 DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 05 FT <input type="checkbox"/> 02 05 - 10 FT <input checked="" type="checkbox"/> 03 10 - 15 FT <input type="checkbox"/> 04 OVER 15 FT | | | | |
| 68 PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input checked="" type="checkbox"/> 04 UNKNOWN | | | 69 POSITION OF MEMBER DISCHARGING WEAPON <input type="checkbox"/> 01 STANDING <input checked="" type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY) | | | | |
| 70 EVENT NO | | | | | | | |

WATCH COMMANDER/OCIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM, 2) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR, 3) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON

THE ADS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING, 1) THE DISCHARGE OF A FIREARM OR IMPACT MUNITIONS BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON, 2) MEMBER'S USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON, 3) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2

75 SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

DNA

REFUSED

UNABLE TO INTERVIEW (Specify Reason)

The offender was a dog!

76 WATCH COMMANDER/OCIC RATIONALE FOR BOX 77 FINDING

The officer was trying to protect himself from an animal attack

77 WATCH COMMANDER/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION

I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS
WERE IN COMPLIANCE WITH DEPARTMENT
PROCEDURES AND DIRECTIVES

I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED

LOG NO /CRNO _____ OBTAINED

78 WATCH COMMANDER/OCIC (Print Name)

FIDLER, BRENT S

SIGNATURE

DATE COMPLETED TIME

17-SEP-2012 20:20:24

79 DISTRIBUTION OF ORIGINAL TRR

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS

ATTACHMENTS - PHOTOCOPIES OF

CASE REPORT
 ARREST REPORT

SUPPLEMENTARY REPORT
 OFFICER BATTERY REPORT
 TO-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)

I O D REPORT
 CR INITIATION REPORT

80 TOTAL TRR's THIS EVENT No

1